

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00499020	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name (Last, First, Middle Initial) of Payee Freedomworks		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M</div> <div style="border: 1px solid black; padding: 2px;">D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 400 N CAPITOL STREET NW SUITE 765		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1899.57</div>		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.95820	
Purpose of Expenditure IE-Mack-Travel	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2906363.60</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>		
City	State	Zip Code		
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">1899.57</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures▶		<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>		
(c) TOTAL Independent Expenditures.....▶		<div style="border: 1px solid black; padding: 2px; text-align: right;">1899.57</div>		
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p>				
Signature <i>Ryan Hecker</i>		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M</div> <div style="border: 1px solid black; padding: 2px;">D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
[Electronically Filed]				